

# LIBRARY SERVICES & TECHNOLOGY ACT

## Competitive Grants Program

### FY 2002-2003 – APPLICATION Form

#### PART I.

<b>Library / Organization:</b>			
<b>Mailing Address:</b>			
<b>Project Title:</b>			
<b>Total Project Cost:</b> <i>(If project is over \$7,500, match must equal 25% of the total cost for a Regular Grant and 35% of the total cost for a Major Grant)</i> \$			
<b>LSTA Funds Awarded:</b>	<b>\$</b>	<b>Match \$</b>	<b>Match %</b>
<b>Total Funds:</b>			
<b>Project Director:</b>			
<i>Phone:</i>	<i>FAX:</i>	<i>Email:</i>	
<b>Organization Director:</b>			
<i>Phone:</i>	<i>FAX:</i>	<i>Email:</i>	

#### Check Applicable Grant Category

TECHNOLOGY INFRASTRUCTURE	
<b>Workstations, Software &amp; related equipment</b>	____ Technology Grant
<b>Telecommunications Upgrades</b>	____ Technology Grant
<b>Integrated Systems Upgrades</b>	____ Technology Grant
<b>Web-Based Catalogs</b>	____ Technology Grant
<b>Basic Technology</b> (newly certified libraries only)	____ Technology Grant
NETWORKED INFORMATION	
<b>Digitization Resources</b>	____ Technology Grant
ENHANCED ACCESS TO LIBRARY SERVICES	
<b>Blind, visually impaired, or learning disabled</b>	____ Assistive Technology Grant
<b>Institutionalized</b>	____ Customized Service Grant
<b>Non-English-speaking</b>	____ Customized Service Grant
<b>Literacy students</b>	____ Customized Service Grant
<b>Other special population groups</b>	____ Customized Service Grant

Mini, Regular and Major grant applications (12 copies for Mini Grants/25 copies for Regular & Major Grant applications) must be postmarked by Wednesday, Oct. 2, 2002 or received by 5:00 p.m. Friday, Oct. 4, 2002, at the Utah State Library Division, 250 North 1950 West, Suite A, Salt Lake City, UT 84116-7901.

**FAXED applications are not acceptable.** Return applications and direct questions to Jane E. Smith, Grants Coordinator (801-715-6742 or 1-800-662-9150) or email to [jesmith@utah.gov](mailto:jesmith@utah.gov).

All FY 2003-2007 LSTA funded projects will be required to incorporate principles of Outcome-based Evaluation (OBE) methods. OBE is a systematic way to assess the extent to which a program has achieved its intended results. Refer to a more complete description of OBE at <http://library.utah.gov/lstagrants.html>.

This application is designed to help your project achieve what you intend to. It will help you identify the specific information you will need to collect or anticipate before, during, and after your project implementation. The terms “project” and “program” are interchangeable.

## PART II.

Complete the following.

<b>Library/Organization</b>	
<b>Project Title</b>	
<b>Library/Organization Mission</b>	
<i>Library's mission statement</i>	

<b>Project Purpose:</b>	
<b>We want to do what?</b> <i>(Summary of key proposed services)</i>	
<b>For whom? (Target population:</b> <i>List specific characteristics of target population to be served by this project. (Age group, special needs, estimated number of people to be served from census figures, local data, school records.)</i>	
<b>For what outcome or benefit?</b> <i>(Tell us what the benefit(s) of this project will be to your target audience.)</i>	
	<b>For Regular and Major Grants only:</b> <i>What indicators will you use to identify benefits to your target audience?</i>

**Project stakeholders/community support:** *(Identify individuals or groups in the community who have actively planned or supported this project and who need to be informed about the project's implementation and impact. These may include target audience, local government administrators, school or library board members, faculty, staff, patrons, and related community organizations. (letters of support may be attached to this application, but are not required)*

**Future funding statement** *(Describe how the project will be supported after LSTA funds are expended)*

**For technology projects only.** *(How will this grant enhance the library's current technology capacity & services? Have you attached a copy of your Three-Year Technology Plan to this application?)*

**How will you implement your project?** *(Action plan)*

<b>How will you inform your library users about these enhanced services?</b>	
<b>How &amp; When Will You Evaluate the Benefits of this Grant Project to the Target Audience?</b>	
<b>How</b>	<b>When</b>

**PART III.**  
**Proposed Project Budget**

Please provide information where applicable and divide your proposed budget into the following categories. Be specific of items for expenditure of funds. (Revisions are possible and require submitting formal paperwork and State Library Division approval. Revisions require an indication of why the change is desired, why other funds can't be used, and specific amounts.)

Category	LSTA Funds	Local Government	Other*	Total Funds
<b>A. PERSONNEL EXPENSES</b>				
Salaries and Wages				
Employee Benefits				
SUBTOTAL				
<b>B. OPERATING EXPENSES</b>				
Travel				
Training				
Materials/Supplies				
Contracted Services				
Other				
SUBTOTAL				
<b>C. EQUIPMENT &amp; CAPITAL OUTLAY EXPENSES</b>				
<i>Computer Hardware</i>				
Computer Software				
Other				
SUBTOTAL				
<b>D. OTHER</b> (Specify below)				
<b>EVALUATION EXPENSES</b>				
SUBTOTAL				
<b>E. PERCENTAGE OF MATCHING FUNDS</b>				
<b>TOTALS</b>				

\*Source of funds in this category include donations, Friends fund raising, private sector grants. Do not include "in-kind" donations.

PROPOSED PROJECT BUDGET DESCRIPTION/JUSTIFICATION
<b>PERSONNEL EXPENSES:</b> (salaries, wages, employee benefits)
<b>OPERATING EXPENSES:</b> (travel, training, materials, supplies, contracted services, other)
<b>EQUIPMENT/CAPITAL OUTLAY:</b> (computer hardware, software, other equipment)
<b>OTHER EXPENSES:</b> (Please specify – shipping & handling, evaluation fees, etc.)

## **PART IV.**

### **SIGNATURES**

The organization/library accepting the fiscal and administrative responsibility for this LSTA grant project should sign first. Please add additional signature lines for the other directors, board chairs, local government or institutional representatives involved in the project.

We hereby certify that all matching funds shown in this application are available for use in this project.

---

**Organization/Library Director**

---

**Local Government or  
Institutional Representative**

---

**Title**

---

**Title**

---

**Date**

---

**Date**

---

**Board Chair (Public Libraries only)**

---

**Project Director  
(if other than Library Director)**

---

**Date**

---

**Date**